

**TESTIMONY OF  
TRINITY HEALTH-NEW ENGLAND  
SUBMITTED TO THE  
FINANCE, REVENUE AND BONDING COMMITTEE  
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HEALTH-NEW ENGLAND  
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**HB 5047, An Act Concerning Exemptions Under The Property Tax**

Trinity Health-New England appreciates the opportunity to submit testimony concerning **HB 5047, An Act Concerning Exemptions Under The Property Tax**. We oppose Sections 2 and 3 of the bill. While we recognize the need for state and local government as taxing authorities to monitor the activities of both taxable and tax-exempt organizations, we oppose the imposition of a new and onerous filing requirement that is specifically targeted to hospitals. HB 5047 would create a new and substantial risk to hospitals of losing their tax-exempt status for real and personal property in any assessment year for failing to file a sufficient declaration for any reason, or for failing to sign such declaration.

Combined, both Saint Francis Hospital and Medical Center and Johnson Memorial Hospital serve more than 35,000 inpatients and 372,000 outpatients among other services in FY2015. We operate a broad range of acute care services, including a Level III NICU, Level II Trauma Center, a teaching Hospital, Cancer Program as accredited by the American College of Surgeons and the only acute Rehabilitation Hospital in Connecticut. Our organization employs over 4,600 people, and contributes over \$1.4 billion annually to the state economy. The two institutions also invested more than \$84.4 million in improving the local community through its Community Benefit programs.

Hospitals already bear a substantial tax burden in the State of Connecticut. The hospital tax has become the fourth largest source of state tax revenue. Trinity Health-New England presently pays the State of Connecticut more than \$42.9 million dollars per year in hospital taxes. In fact, hospitals are being taxed at 30 times the corporate tax rate as it stands today.

In addition, where appropriate, Trinity Health-New England pays local governments property tax. In FY 2015 this direct property tax bill exceeds \$2 million. However, as a tenant in many locally owned medical offices, Trinity Health-New England also pays property tax to those municipalities through its rents.

House Bill 5047 would require any hospital claiming an exemption from the property tax to file a personal property declaration and affidavit for each assessment year in every municipality in which such personal property is located. The requirement to file a declaration and affidavit presently applies to the owners of taxable personal property in our state, but has not heretofore been applied to organizations that are not otherwise subject to the property tax. Under current law, exempt organizations are only required to file a report once every four

years, and they are not required to file a complete declaration of personal property with the quadrennial filing.

The current declaration form is eight pages in length, and includes fifteen categories of personal property including motor vehicles, machinery and equipment, furniture and fixtures, electronic data processing equipment, average monthly quantity of supplies normally consumed in the course of business, and any other personal property not otherwise mentioned, including leasehold improvements. The declaration is a formidable document that would require several individuals working for a substantial period of time to complete the form sufficiently for every municipality in which a hospital owns personal property.

The bill subjects a hospital to a risk of full taxability of all property, both real and personal, if the hospital inadvertently fails to file a declaration, or if the declaration filed includes insufficient information in the opinion of the assessor, or if it is not signed. The bill states that “exemptions claimed pursuant to subdivision (7) or (16) of section 12-81... shall be deemed waived” for any assessment year in which a hospital fails to file the required declaration in a timely manner. The waiver extends to exemptions under those sections and is not expressly limited to personal property. This means that a hospital may lose its tax-exempt status for a year for all property claimed to be exempt in said municipality, including personal and real property.

Under such a scenario, a hospital would be forced to pay taxes on all of its real and personal property located in said municipality. The absence of proportionality between the offense committed and the penalty imposed is startling. Moreover, it is contrary to principles of fairness and equity in the administration of taxes and the treatment of organizations such as hospitals. Hospitals already contribute a great deal of money in taxes to finance the cost of state and local government. They fortify our economy through the jobs they create and the goods and services they consume, and they keep the people of Connecticut healthy. We implore the Committee to address this troubling aspect of the bill.

Another distressing and potentially discriminatory aspect of the bill is that it applies only to hospitals claiming an exemption from the property tax. This bill treats hospitals differently from other organizations that are generally exempt from property taxes, such as schools, colleges, charitable organizations, museums, and social and human service organizations. If this measure is intended to enable government to learn more about personal property that is not presently subject to taxation, or to better monitor the activities of exempt organizations, then we question the wisdom and efficacy of limiting this requirement solely to a narrow category of taxpayers, defined in the bill to include any (1) not-for-profit general hospital facility, (2) ambulatory surgical center, (3) freestanding chronic disease hospital, or (4) urgent care facility that operates for at least 12 hours a day.

Finally, the annual filing date of October 1 established in the bill is not consistent with the required filing date of November 1 for all other entities or taxpayers required to file with the local assessor. It is also not consistent with the date hospitals are required to file their quadrennial reports. This inconsistency creates a potential trap for a hospital administrator, who could incorrectly assume the hospital had to file any required filing by the standard date of November 1. And as we’ve already stated, the financial consequences of a failure to file the declaration and affidavit in a timely manner, namely, a waiver of the exemption and payment

of real and personal property taxes would constitute a material adverse financial event for any hospital.

We recognize that the state is attempting to address persistent and intensifying fiscal challenges. We ask that you please do not impose on hospitals new and onerous administrative burdens with financial penalties that far outweigh the nature of the offense.

Hospitals should be encouraged by the state to focus on our core mission of improving the individual experience of care, improving the health of populations, and reducing the per capita costs of care. Imposing new administrative burdens on hospitals and exposing them to the risk of higher costs through taxation via administrative penalty is contrary to our core mission and is not in the best interest of public health. Thank you for your consideration of our position.